24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Mississippi Conservatives	FEC IDENTIFICATION NUMBER ▼ C C00554774
Check if Z 24-hour report 48-hour report New report Amends report fi	iled on M M / D D / Y Y Y Y Y
Full Name of Payee Greenwood Commonwealth	Date of Public Distribution/Dissemination
Mailing Address PO Box 8050	Amount
City State Zip Code Geenwood MS 38935	625.65 Transaction ID : SE.4962 Date of Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement Category/ Type 004	10 31 / 2014
Name of Federal Candidate X Support Thad Cochran Oppose	ffice Sought: House District: President Senate State: MS
	isbursement For: Primary General Other (specify) Other
Full Name of Payee Starkville Daily News	Date of Public Distribution/Dissemination 11 02 2014
Mailing Address 304 E. Lampkin Street	Amount
City State Zip Code Starkville MS 39759	774.00 Transaction ID : SE.4961 Date of Disbursement or Obligation
Purpose of Expenditure Newspaper Advertisement Category/ Type 004	Date of Disbursement of Obligation
Name of Federal Candidate Thad Cochran Support Oppose	Iffice Sought: House District: President X Senate State: MS
	isbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	1399.65
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1399.65
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Brian Perry [Electronically Filed] Date	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y